

MICHIGAN DEPARTMENT OF STATE

BUREAU OF ELECTIONS

ORIGINAL OR AMENDED CANDIDATE COMMITTEES

DOANIZATION FO	RM FOR CANDIDATE COMMITTEES
STATEMENT OF ORGANIZATION FO	10. V REPORTING WAIVER REQUEST: If the committee does
1. Committee ID #:	
	and checks this box, the limity to the Beneding Waiver will be
2. Type of Filing:	campaign statements is warved. The Reporting statements is warved.
Osimpal	automatically lost if the commission or Intended Depositories
Amendment to Items: Eff. Dates	11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan
	of committee funds. (Michigan Barin, Cross
and last name): COMMittee to elect John	Association)
and last name): COMMINITY STOCK	a. Official Depository
4a. Candidate Full Name (Last, First, M.I.);	TOP BANK
SPECA JOHN P	100000000000000000000000000000000000000
Spiro/ Ooli	b. Secondary Depository
Ab. Political Party (If applicable):	
Ac. County of Residence:	b. Secondary Depository
1 MAC-10-173	b. Secondary Softs
4d. Office Sought (Check one):	
The same of the sa	200 -0 0
I I Governor LJ LL Governor 🚘	
State Rep.	12. This item applies only to Gubernatorial Candidate
State 8d, of Ed. Court	I - Chack & This committee (North 2)
WSU GOV. Probate Court	contributions or make qualifying expanditures m
Circuit Court	13. ELECTRONIC FILING: This item applies to committees that file
Municipal Court	13. ELECTRONIC FILING: This item applies to selections only and with the Michigan Department of State Bureau of Elections only and with the Michigan Department of State Bureau of Elections only and
Local or other please specify:	does not apply to candidates that the with the
Local or other please specify: 4e. District/Circuit # or Jurisdiction: STERLIM HETISHT! MACONS MACONS	and committee that thes
5. Date Committee was Formed:	The Campaign Finance Act requires any the secretary of State and spends or receives \$20,000 in the with the Secretary of State and spends or receive or spend \$20,000
ere at the 251	with the Secretary of State and special or receive or spend \$20,000 preceding calendar year OR expects to receive or spend \$20,000
*	preceding calendar year on expects file campaign statements in the current calendar year to file campaign statements electronically. Merts Plus software is provided to you free of electronically.
6b. Committee Fax #: NA	charge to assist you in meeting this requirement.
- 1	Committee spent or received or expects to spend or receive in
6c. Committee E-mail Address:	excess of \$20,000 and is required to file electronically.
7a. Complete Comm. Mailing Address (May be PO Box):	** OR **
38322 Ohyllis ct	and the spend of does not expect to spend
56,500 V	or receive in excess of \$20,000 and would like to file electronically
Scaling Heights 47 4/3/2	voluntarily.
A Address (May not be PO Box):	that all reasonable difficence was used
7b. Complete Comm. Street Address (May not be PO Box):	
36322 phyllis at	
Stalin Helpts MI 4B12	
11.57	below shall serve as me signatures that votally by the committee.
8. Treasurer Name and Complete Address:	
JOH SPAT	preparation of each statement will be true, accurate and and that the contents of each statement will be true, accurate and and that the contents of each statement will be true, accurate and
38322 Phillip ct	and that the contents of each statement will be
38322 Phyllin ct St. Heyli 1 1 4 19312	and Date)
Phone #: 516-2164-075	Candidate / /-24-07
, ,	127
E-mail Address;	
9. Designated Record Keeper Name and Complete Address:	Current Treasurer.
JOHN SPEA	
38322 Phylla et:	10003 04 70 700
of he the contract	01/24/07 WED 15:51 [TX/RX NO 5800]